LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

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LOBBYISTS (Sec. 67-6619)

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THIS SPACE FOR OFFICE USE ONLY

2005 SEP 21 AM 9: 44

SECRETARY OF STATE
STATE OF IDAHO

			s at bottom of page						Si	IATE OF IDAHO	
Lobbyist's name and permanent business address TEVI OHENS FOBOX 3224							repared		Period covered		
	Terl	offer	75							year chang	
,	40 B	OX 8:	224				9/6/0	06			
			> 83707				,, ,		(Mo	.) (Day) (Yr.) 31 06	
Item 1	Totals	of all reportab	ele expenditures made on	incurred	by Lobbyist	or by	Lobbyist's Emplo	oyer on behalf	<u> </u>		
Ca Reimburs	tegory of Ex	ing and Travel	* Total Amount for	Proportio	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)						
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			All Employers	Employer No. 1		Employer No. 2		Employer No. 3		Employer No. 4	
	inment nd Refreshm	nent .	s	\$	0	. \$ _	0	\$	···	\$	
Living	Accommoda	ations			<u> </u>	. _					
Advert	ising					. _					
Travel											
Teleph	one										
Other I	Expenses or	Services						44.4			
		Total	s	\$	0	\$_	0	\$		\$	
*1	When the num	ther of employers	you are reporting for requ	ires multipl	e I -2 forms to	he file	ed a total amount fo	r all amployare	should be	entered on Page 1	
Item			iture of more than fifty	-						e entered on Fage 1.	
2	Date Place Amount										
	Continued on	attached page(s)									
INSTRUCTIONS							En	Employer(s) Name(s) and Address(es)			
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code. Filing deadline: Annual report is due on January 31st.						NO.1 CAPAI POBOX 8224, BOBE, 8370 NO.2 JAMB PO BOX 8224, BOISE 8370					
											ТО
PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282						4					

Item 4				lator, or for or on behalf	by the lobbyist's employer in the nature of contributions of money or other tangible or intangible for or on behalf of any legislator.							
	<u> </u>	hate	Amount			Name of Legislator Receiving	or Bene	fited				
Item 5	or Ho	use Bill, I obbyist w	Resolution or other as supporting or o		Code	LEGISLATIVE SUB		IDENTIFICATION Subject Health service, medicine, drugs				
Subject (from t	able)	Legislati	olution or Other ve Ident. Number	Appropriation Bill Number and Section Number	02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Agnetitute, norticulare, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, special districts Government, state Lobbyist signature Lobbyist signature Employer No. 1 signature	18 19 20 21 22 23 24 25 26 27 28 29 30 31	and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify) Date 9 10 0 Date 9 13 0 Date Date				
				above is a true, complete and 67-6624 Idaho Code.	4	Employer No. 3 signature Employer No. 4 signature		Date				